								Application or Docket Number					
	PATENT A	RD	10/68/4/9										
		CLAIMS AS	S FILED - (Column					SMALL ENTITY TYPE		OR	OTHER SMALL		
TOTAL CLAIMS			4	<i>f</i>		•		RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			4 minus 20=		* 7	· 0		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS) minus 3 =		0	· 0		X43=		OR	X86=		
MU	ILTIPLE DEPEN	NDENT CLAIM PR	RESENT					+145=		OR	+290=		
* If	the difference	in column 1 is!	less than ze	ess than zero, enter "0" in column 2			L	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II											OTHER		
凸	 	(Column 1)	τ	(Column 2) (Column 2) (Column 2)			r	SMALL	ENTITY	OR 1	SMALL		
AMENDMENT A	8,207	REMAINING AFTER AMENDMENT		NUME PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	. 4	Minus	A	0	8	ĺ	X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF ML	Minus	BENDENT	<u>5</u>			X43=		OR	X86=		
	FIRST PRESE	NIAHUN OF MIC	JUIPLE DEF	PINDEINI	CLAIIVI			+145=		OR	+290=		
·							L	TOTAL		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								W			ADD: 22.		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	*	Minus	**		<i>a</i>	ı	X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	*	Minus	***		=	ľ	X43=		OR	X86=		
لثا	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=		OR	+290=		
TOTAL											TOTAL		
		(Column 3)	A	ADDIT. FEE	L] ,	ADDIT. FEE						
	CLAIMS			(Colum HIGHE NUME	EST		Г		ADDI-			ADDI-	
AMENDMENT C		AFTER AMENDMENT	.	PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
NON	Total	•	Minus	##		= .		X\$ 9=		OR	X\$18=		
AME	Independent		Minus	***			T	X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		t	. 1 4 5			.200-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										OR ,	ADDIT. FEE		
		nber Previously Paid					four	nd in the ap	propriate box	t in col	umn 1.		